



King County
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Boeing Field

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2008
OFFSITE DISCHARGE
RECONNAISSANCE

Section 1. Background Data

Structure #: MH-1-E

Inspection Date	6/27/08	Initial Inspection	<input checked="" type="checkbox"/>
Inspection Time	10:40 AM	Inspection #	1
Weather Conditions	Sunny		
Inspector Name(s)	Peter D., Jesse L.	Rainfall (in, last 24h)	0.0
Inspection Participants		Rainfall (in, last 48h)	0.0
KCIA Drainage Basin #	5		
KCIA Outfall #	5		
Tenant Area (as applicable)	FAA Control Tower, NBF	Photos Taken?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 2. Discharge Structure Description

Manhole	<input checked="" type="checkbox"/>	Catch Basin	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>
Material	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____				
Shape	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Channel <input type="checkbox"/> Other: _____				
Outlet Dimension (in)	Diameter/Dimensions: <u>24"</u>				
Flow Present?	<input type="checkbox"/> Yes, Estimate Flow <input checked="" type="checkbox"/> No, Go To Section 5				
Flow Description (if present)	<input type="checkbox"/> Slow <input type="checkbox"/> Moderate <input type="checkbox"/> Fast				

Section 3. Quantitative Characterization

Turbidity (NTU)	9.9
pH (standard units)	6.75
Temperature (°C)	22.3

Section 4. Physical Indicators For Flowing Water

Indicator	Check if Present	Description	Relative Severity Index (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/Sour <input type="checkbox"/> Petroleum/Gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: _____	<input type="checkbox"/> Faint <input type="checkbox"/> Easily Detected <input type="checkbox"/> Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Other: _____	<input type="checkbox"/> Faint colors in sample bottle <input type="checkbox"/> Clearly visible in sample bottle <input type="checkbox"/> Clearly visible in discharge flow
Turbidity	<input type="checkbox"/>	See Severity	<input type="checkbox"/> Slight cloudiness <input type="checkbox"/> Cloudy <input type="checkbox"/> Opaque
Floatables	<input type="checkbox"/>	<input type="checkbox"/> Sewage (toilet paper, etc) <input type="checkbox"/> Suds <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other: _____	<input type="checkbox"/> Few/slight <input type="checkbox"/> Moderate <input type="checkbox"/> Obvious

Section 5. Physical Indicators For Flowing/Non-flowing Water

Are physical Indicators that are not related to flow present? ☐ Yes ☐ No (if No, go to Section 6)

Indicator	Check if Present	Description	Comments
Structural Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking, Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Other: _____	
Deposits/Stains	<input checked="" type="checkbox"/>	<input type="checkbox"/> Oily <input checked="" type="checkbox"/> Flow line <input type="checkbox"/> Paint <input type="checkbox"/> Other: _____	
Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited <input type="checkbox"/> Other: _____	
Pool Quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: _____	
Benthic Growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: _____	

Section 6. Overall Discharge Characterization

<input checked="" type="checkbox"/> Unlikely (Flowing or Non-flowing condition with no indicators observed)
<input type="checkbox"/> Potential (Flowing or Non-flowing condition with two or more indicators)
<input type="checkbox"/> Suspect (Flowing with one or more indicators with severity of 3)
<input type="checkbox"/> Obvious (Illicit discharge is occurring)

If Overall Discharge Characterization is **Suspect** or **Obvious**, Conduct Source Investigation Immediately

TAXIWAY BRAVO REHAB - WATER QUALITY/EROSION CONTROL MONITORING DATA

Water Quality Data: (Refer to Monitoring Locations)

Date	Time	Weather	Rainfall	Photos Taken	Discharge location	Turbidity (NTU)	pH Value	Temperature (°C)	Comment
10/3/2008	3:45 PM	Rain	0.19	No	3	74.8	6.7	19.5	No discharge from outlet
10/10/2008	3:40 PM	Sunny	0.01	No	3	66	7.8	15.6	No discharge from outlet
10/17/2008	11:20 AM	P.Sunny	0	Yes	3	73	7.5	17.2	No discharge from outlet
10/23/2008		P.Sunny	0.15	Yes	3	45.3	7.7	16.6	No discharge from outlet
10/31/2008	4:15 PM	Overcast	0.33	Yes	3	62.5	7.7	16.1	Trickle
11/7/2008	12:55 PM	Overcast	2.71	No	3	16	7.6	16.5	
11/14/2008	3:25 PM	Overcast	0	No	3	56.3	7.4	13.9	No discharge from outlet
11/21/2008	3:40 PM	Overcast	0.01	No	3	17.8	7.4	13.8	No discharge from outlet
11/27/2008	12:40 PM	Sunny	0.02	Yes	3	57.8	7.4	13.4	